

Polling Place Accessibility Supplies

Wisconsin Government Accountability Board

County: _____

Municipality: _____

Clerk Name: _____

Shipping Address*: _____







*Please no P.O. Boxes

Indicate the Quantity Needed in the Table Below

Address is a:

☐ Business/Municipal Building

☐ Private Residence

	Item	# Needed
	Van-Accessible sign 6" x 12"	
	Reserved Parking Left Arrow sign 12" x 18"	
	Reserved Parking Right Arrow sign 12" x 18"	
	Access at Rear sign 12" x 18"	
	Window Decal 6" x 6"	
	Signature Guide 5" x 8" total. Typoscope cutout 5/8" x 6" Signature cutout 1/2" x 2 1/2 "	